

Complete one form for each site closure.

The information you provide may be used for secondary purposes [Privacy Law, s.15.04 (1)(m)].

CHECKLIST FOR TANK CLOSURE

CHECK ONE:

☐ **UNDERGROUND**
☐ **ABOVEGROUND**

FOR PORTIONS OF THE FORM THAT DO NOT APPLY, CHECK THE N/A BOX

RETURN COMPLETED CHECKLIST TO:

Wisconsin Department of Commerce
 ERS Division
 Bureau of Petroleum Products and Tanks
 P.O. Box 7837
 Madison, WI 53707-7837

A. IDENTIFICATION: (Please Print) Indicate whether closure is for: ☐ **Tank System** ☐ **Tank Only** ☐ **Piping Only**

1. Site Name			2. Owner Name		
Site Street Address (not P.O. Box)			Owner Street Address		
<input type="checkbox"/> City	<input type="checkbox"/> Village	<input type="checkbox"/> Town of:	<input type="checkbox"/> City	<input type="checkbox"/> Village	<input type="checkbox"/> Town of:
State		Zip Code	County		Telephone No. (include area code) ()
3. Closure Company Name (print)			Closure Company Street Address		
Closure Company Telephone No. (include area code) ()			Closure Company City, State, Zip Code		
4. Name of Company Performing Closure Assessment			Assessment Company Street Address, City, State, Zip Code		
Telephone No. (include area code) ()		Certified Assessor Name (print)	Assessor Signature		Assessor Certification No.

Tank ID #	Closure	Temp. Closure	Closure in Place	Tank Capacity	Contents*	Closure Assessment
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Y <input type="checkbox"/> N
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Y <input type="checkbox"/> N
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Y <input type="checkbox"/> N
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Y <input type="checkbox"/> N

* Indicate which product: Diesel; Leaded; Unleaded; Fuel Oil; Gasohol; Aviation Fuel; Kerosene; Premix; Waste/Used Motor Oil; Flammable/Combustible Hazardous Waste; Chemical (indicate the chemical name(s) _____ and CAS number(s) _____; Other _____.

Written notification was provided to the local agent 15 days in advance of closure date. ☐ Y ☐ N
 All local permits were obtained before beginning closure. ☐ Y ☐ N ☐ NA

Check applicable box at right in response to all statements in Sections B-E.

B. ☐ TEMPORARILY OUT OF SERVICE

	Remover Verified	Inspector Verified	NA
1. Product Removed			
a. Product lines drained into tank (or other container) and liquid removed, AND	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
b. All product removed to bottom of suction line, OR	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
c. All product removed to within 1" of bottom.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
2. Fill pipe, gauge pipe, tank truck vapor recovery fittings, and vapor return lines capped.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
3. All product lines at the islands or pumps located elsewhere are removed and capped, OR	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
4. Dispensers/pumps left in place but locked and power disconnected.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
5. Vent lines left open.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
6. Inventory form filed indicating Temporary-Out-Of-Service (TOS) closure.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>

C. ☐ CLOSURE BY REMOVAL

1. Product from piping drained into tank (or other container).	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
2. Piping disconnected from tank and removed.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
3. All liquid and residue removed from tank using explosion proof pumps or hand pumps.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
4. All pump motors and suction hoses bonded to tank or otherwise grounded.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
5. Fill pipes, gauge pipes, vapor recovery connections, submersible pumps and other fixtures removed.....	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
NOTE: DROP TUBE SHOULD NOT BE REMOVED IF THE TANK IS TO BE PURGED THROUGH THE USE OF AN EDUCTOR.			
6. Vent lines left connected until tanks purged	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	
7. Tank openings temporarily plugged so vapors exit through vent.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
8. Tank atmosphere reduced to 10% of the lower flammable range (LEL) - see Section E.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
9. Tank removed from excavation after PURGING/INERTING ; placed on level ground and blocked to prevent movement.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>
10. Tank cleaned before being removed from site.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>

11. Tank labeled in 2" high letters after removal but before being moved from site. ☐ Y ☐ N ☐ ☐
- NOTE: COMPLETE TANK LABELING SHOULD INCLUDE WARNING AGAINST REUSE; FORMER CONTENTS; VAPOR STATE; VAPOR FREEING TREATMENT; DATE.**
12. Tank vent hole (1/8" in uppermost part of tank) installed prior to moving the tank from site. ☐ Y ☐ N ☐ ☐
13. Site security is provided while the excavation is open. ☐ Y ☐ N ☐ ☐

D. ☐ CLOSURE IN PLACE

NOTE: CLOSURES IN PLACE ARE ONLY ALLOWED WITH THE PRIOR WRITTEN APPROVAL OF THE DEPARTMENT OF COMMERCE OR LOCAL AGENT.

1. Product from piping drained into tank (or other container). ☐ Y ☐ N ☐ ☐
2. Piping disconnected from tank and removed. ☐ Y ☐ N ☐ ☐
3. All liquid and residue removed from tank using explosion proof pumps or hand pumps. ☐ Y ☐ N ☐ ☐
4. All pump motors and suction hoses bonded to tank or otherwise grounded. ☐ Y ☐ N ☐ ☐
5. Fill pipes, gauge pipes, vapor recovery connections, submersible pumps and other fixtures removed. ... ☐ Y ☐ N ☐ ☐
- NOTE: Refer to section E for method of vapor freeing the tank**
6. Vent lines left connected until tanks purged. ☐ Y ☐ N ☐ ☐
7. Tank openings temporarily plugged so vapors exit through vent. ☐ Y ☐ N ☐ ☐
8. Tank atmosphere reduced to 10% of the lower flammable range (LEL) see Section F. ☐ Y ☐ N ☐ ☐
9. Tank properly cleaned to remove all sludge and residue. ☐ Y ☐ N ☐ ☐
10. Solid inert material (sand, cyclone boiler slag, pea gravel recommended) introduced and tank filled. ☐ Y ☐ N ☐ ☐
11. Vent line disconnected or removed. ☐ Y ☐ N ☐ ☐
12. Inventory form filed by owner with the Department of Commerce indicating closure in place. ☐ Y ☐ N ☐ ☐

E. METHOD OF VAPOR FREEING TANK

- ☐ Displacement of vapors by Eductor or Diffused Air Blower
Eductor driven by compressed air, bonded and drop tube left in place; vapors discharged minimum of 12 feet above ground.
Diffused air blower bonded and drop tube removed. Air pressure not exceeding 5 psig.
- ☐ Inert Gas using Dry Ice or Liquid Carbon Dioxide
Dry Ice introduced at 1.5 pounds per 100 gallons of tank capacity. Dry ice crushed and distributed over the greatest possible tank area.
- ☐ Inert Gas using CO₂ or N₂ **NOTE: INERT GASSES PRODUCE AN OXYGEN DEFICIENT ATMOSPHERE. LEL METERS MAY NOT FUNCTION ACCURATELY. THE TANK MAY NOT BE ENTERED IN THIS STATE WITHOUT SPECIAL EQUIPMENT.**
Gas introduced through a single opening at a point near the bottom of the tank at the end of the tank opposite the vent.
Gas introduced under low pressure not to exceed 5 psig to reduce static electricity. Gas introducing device grounded.
- ☐ Readings of 10% or less of the lower flammable range (LEL) or 0% oxygen obtained before removing tank from ground.
- ☐ Tank atmosphere monitored for flammable or combustible vapor levels prior to and during cleaning and cutting.
- ☐ Calibrate combustible gas indicator and/or oxygen meter prior to use. Drop tube removed prior to checking atmosphere. Tank space monitored at bottom, middle and upper portion of tank.

F. CLOSURE ASSESSMENTS

NOTE: DETERMINE IF A CLOSURE ASSESSMENT IS REQUIRED BY REFERRING TO COMM 10.

1. Individual conducting the assessment has a closure assessment plan (written) which is used as the basis for their work on the site. ☐ Y ☐ N ☐ ☐
2. Do points of obvious contamination exist? ☐ Y ☐ N ☐ ☐
3. Was a field screening instrument used to pre-screen soil sample locations? ☐ Y ☐ N ☐ ☐
4. Was the DNR notified of suspected or obvious contamination? ☐ Y ☐ N ☐ ☐
- Agency, office and person contacted: _____
5. Contamination suspected because of: ☐ Odor ☐ Soil Staining ☐ Free Product ☐ Sheen on Groundwater ☐ Field Instrument Test

G. ☐ Form ERS-7437 or ERS-8731 filed by owner with the Dept. of Commerce indicating closure. ☐ Y ☐ N

H. NOTE SPECIFIC CLOSURE PROBLEMS OR CONCERNS BELOW

I. REMOVER/CLEANER INFORMATION

Remover Name (print) _____ Remover Signature _____ Remover Certification No. _____ Date Signed _____

I certify that the procedures and information that I have provided as the tank closure contractor are correct and comply with Comm 10.

J. INSPECTOR INFORMATION

Inspector Name (print) _____ Inspector Signature _____ Inspector Cert # _____ LPO Agency #: _____

FDID # For Location Where Inspection Performed _____ Inspector Telephone Number _____ Date Signed _____

TANK INVENTORY FORM ERS-7437 or ERS-8731 SIGNED BY THE OWNER MUST BE SUBMITTED WITH EACH CLOSURE CHECKLIST

Copied Distribution: White – Commerce Blue – Inspector Pink – Contractor Yellow - Owner